



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

November 12, 2013

Torie Lehman  
1003 SW 3<sup>rd</sup> Street  
Ankeny, IA 50023

Dear Ms Lehman,

This letter is in regards to the November 7, 2013 compliance check of your Category B, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

☐ 110.5(1)a Numbers for police, fire, ambulance, poison information posted by phone.

☐ 110.5(1)a Numbers for each child's parent, physician, and a responsible person are accessible by the phone.

**You are no longer are required to have a land line. You are required to have all of the above phone numbers programmed into your cell phone. In addition, you may also post these numbers up in writing for easy access.**

☐ 110.5(1)b All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child.

**The cat litter box was in a room away from the children, however, because this room is easily accessible and located near the restroom that the children use, you will need to put a baby gate up to prevent the children from going into that room.**

☐ 110.5(1)d Medicines are given only with written authorization from the doctor or parent.

**Any medication, over the counter or prescription, requires that parents sign a consent form. This form is on page 17 of your packet. Please be sure to obtain consents even for minor products such as sun screen, ora gel, and pedia lite.**

☐ 110.5(1)d Prescribed medicines are accompanied by doctors' or pharmacist's direction.

**You are in compliance, this is just for your information and reference.**

☐ 110.5(1)d All medicines are in original containers with directions intact and labeled with child's name.

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Story/Boone County Office  
126 South Kellogg, Suite 101  
Ames, IA 50010  
Telephone: (515) 292-2035: Fax: (515) 296-2672

**You are in compliance, this is just for your information and reference.**

☐ 110.5(1)d Medicines are stored properly including refrigeration in a separate covered container.

**You are in compliance, this is just for your information and reference.**

☐ 110.5(1)d Medicines are inaccessible to children.

**You are in compliance, this is just for your information and reference.**

☐ 110.5(1)j Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits.

☐ 110.5(1)j The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas.

**You will need to have these plans and instruction in writing and also diagramed on a copy of a floor plan of your home. Please refer to page 21 for assistance. At the bottom of this page there is an assessor's website that you can access to print of a copy of your home's floor plan. If you rent your property, you can request this from your landlord or property manager.**

☐ 110.5(1)k Fire and tornado drills are practiced monthly and documentation kept.

**Use the form on page 16 to document monthly practices. You can also use this form to keep track of testing your smoke detectors each month. It is suggested to place this document on your refrigerator or another obvious place that the children cannot reach to remind yourself to practice and test monthly.**

☐ 110.5(1)m Has not less than one **2A 10BC** rated fire extinguisher in a visible and readily accessible place on each child-occupied floor.

**You will need a fire extinguisher that is a classification 2A 10BC or larger. Please make sure you check the classification before your purchase. Extinguishers can be purchased at places such as Wal-Mart, Menards, and Home Depot.**

☐ 110.5(1)n Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway.

**You will need to replace the battery to the smoke detector in the living room.**

☐ 110.5(1)s If children use above ground or in-ground swimming pools:

☐ 110.5(1)s Written permission from the parents is on file.

**This includes wading pools. You can create your own activity form or write this informally on piece of paper that is signed and dated by a parent. I would also suggest that you update permissions slips and consents yearly.**

☐ 110.5(1)s The provider has completed training in CPR for infants, toddlers, and children. Documentation of current certification is on file.

**You indicated that you completed a CPR class but were unable to locate your certification card. Please be sure to find this and keep a copy in your personal provider file. If you are not able to locate the certification to verify your attendance, you will be required to take another class. Please be sure that the class provided training for INFANTS, TODDLERS, AND CHILDREN.**

**110.5(2) A provider file is maintained and contains:**

☐ 110.5(2)a A physician's signed statement of health and immunization status on the provider and all members of the household who may be present when children are in the home. Statements must be obtained at the time of initial registration and updated **every two years**.

**You indicated you recently had an exam and will obtain this paper work from your physician and keep in your personal provider file.**

☐ 110.5(2)b Certificates or training verification documentation for:

☐ 110.5(2)b Within the first three months of registration:

☐ 110.5(2)b Two hours of approved child abuse and neglect mandatory reporter training (and every 5 years thereafter.)

**You indicated you needed to locate this certificate but had completed the class. Please include this in your provider file.**

☐ 110.5(2)b Certification by an approved trainer/organization in infant and child first-aid that includes mouth-to-mouth resuscitation. Certification will be maintained throughout period of registration. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR.

**Call Child Care Resource and Referral at 1-800-722-7619 for assistance with locating classes.**

☐ 110.5(2)b During the first year of registration – **12 hours** of approved training. At least six hours shall be in a group setting. Two of the twelve hours must be health and safety training. A specific training shall not be used to meet requirements more than one time every five years.

**Call Child Care Resource and Referral at 1-800-722-7619 for assistance with specifics on the criteria for training hours and class/training availability.**

☐ 110.5(2)b During the second year of registration and each succeeding year, **twelve hours** of approved training. At least six hours shall be in a group setting. If the provider has documentation of completing the ChildNet, PITC, or Beyond Business Basics series, these hours may be used to fulfill two year's training requirements, not including first aid and mandatory reporter training. A specific training shall not be used to meet requirements more than one time every five years.

**Call Child Care Resource and Referral at 1-800-722-7619 for assistance with specifics on the criteria for training hours and class/training availability.**

**In total, you will need 24 hours in a two year period, from registration start to registration expiration, which occurs every two years.**

#### **110.5(8) Children's Files**

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency.

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment.

**Use form on page 3, Emergency Medical Treatment Authorization. Each child will need to have a form in their file signed by a parent.**

☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance.

**You can use page 5 the Child Health Exam Form or request the parent obtain similar documentation.**

☐ 110.5(8)d For school-aged children: On the first day of attendance, a statement of health status signed by the parent or legal guardian.

**Use form on page 4, Child Medical Update.**

☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted **annually**.

**Use form on page 4, give to parents to take with them when their child visits the doctor. Or, parents can obtain similar documentation signed by the child's physician.**

☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical.

**Use document on page 9, Iowa School Age Care Health Status.**

☐ 110.5(8)f A list signed by the parent which names persons authorized to pick up the child, their telephone number, and relationship to the child.

☐ 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.

**Use page 9 and 11, Iowa School Age Care Health Status.**

☐ 110.5(8)i Written permission from the parent(s) for their child to attend activities away from the child development home. It must include times of arrival and departure, destination, and person(s) responsible for the child.

☐ 110.5(8)j Injury report forms to document injuries requiring first aid or medical care.

**Page 13-Injury Report Form.**

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations on or before December 31, 2013.**

x ☐ Based on the items out of compliance listed above, you will be required to have a re-check or follow-up visit to your home. This visit will occur on or after January 6, 2014.

☐ Based on the items out of compliance listed above, a re-check or follow-up visit to your home is not necessary. However, it is essential you come into complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

**I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.**

**Please sign and date below, and return this form in the provided envelope by: December 31, 2013.**

X \_\_\_\_\_

Signature

Date

Please call me if you have any further questions.

Sincerely,



Melissa Crawford  
Child Development Home Compliance Checks  
DHS, Dallas County  
210 N. 10<sup>th</sup> Street  
Adel, IA 50003  
(515) 993-1742 (ph)  
(515-) 564-4033 (f)

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at (Text field for phone).

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to [http://www.dhs.state.ia.us/Consumers/Child\\_Care/Professional\\_Development.html](http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html) and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).